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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration Submitted with Initial Filing       Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)  
OR

Attorney Docket Number	P05701
First Named Inventor	Vladislav Vashchenko
<b>COMPLETE IF KNOWN</b>	
Application Number	/
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**SINGLE MASK CONTROL OF DOPING LEVELS**

*(Title of the Invention)*

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

(if applicable):

Application Number

and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES      NO
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>

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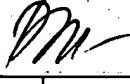
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**DECLARATION — Utility or Design Patent Application**

Direct all correspondence to:  Customer Number \_\_\_\_\_ OR  Correspondence address below

Name Jurgen Vollrath			
Address 588 Sutter Street # 531			
Address San Francisco CA 94102			
City	State	ZIP	
USA	408-667 1289	Fax	
Country	Telephone		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name Vladislav (first and middle [if any])		Family Name Vashchenko or Surname		
Inventor's Signature			Date 10/06/03	
Residence: City Palo Alto	State CA	ZIP 94306	Country USA	Citizenship Russia
Mailing Address 700 Paul Ave				
Mailing Address Palo Alto				
Palo Alto	CA	94306	USA	Country USA
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name Andy (first and middle [if any])		Family Name Strachan or Surname		
Inventor's Signature 			Date 10/8/03	
Residence: City Santa Clara	State CA	ZIP 95051	Country USA	Citizenship UK
Mailing Address 555 Barto Street				
Mailing Address Santa Clara				
Santa Clara	CA	95051	USA	Country USA
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.				

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PTO/SB/02A (11-00)

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## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Peter J.		Hopper	
Inventor's Signature	Date 10-6-03.		
Residence: City San Jose	State CA	Country USA	Citizenship UK
Mailing Address 4327 Verdigris Circle			
Mailing Address			
City San Jose	State CA	ZIP 95134	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Philipp		Lindner	
Inventor's Signature	Date 10/8/03		
Residence: City San Jose.	State CA	Country USA	Citizenship Australia
Mailing Address 6180 Cahalan Ave			
Mailing Address			
City San Jose	State CA	ZIP 95123	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature	Date		
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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## POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	Vladislav Vashchenko, et al.
Group Art Unit	
Examiner Name	
Attorney Docket Number	P05701

I hereby appoint:

Practitioners at Customer Number

Place Customer  
Number Bar Code  
Label here

OR

Practitioner(s) named below:

Name	Registration Number
Jurgen K. Vollrath; Christopher Byrne	49,098; 32,204
John Maxin; Peter Y. Wang	34,668; 40,452
Andrew S. Viger; Eugene C. Conser	28,552; 39,149
Coleman F. Reif; Allen R. Tremain	38,593; 40,207

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.

OR

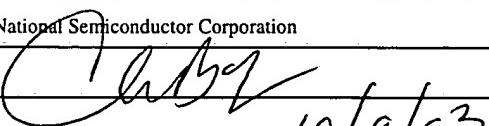
<input checked="" type="checkbox"/> Firm or Individual Name	Jurgen K. Vollrath				
Address	588 Sutter Street # 531				
Address					
City	San Francisco	State	CA	Zip	94102
Country	USA				
Telephone	408-667 1289	Fax			

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

### SIGNATURE of Applicant or Assignee of Record

Name	National Semiconductor Corporation
Signature	
Date	10/9/03

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

\*Total of \_\_\_\_\_ forms are submitted.